# Pre-class questions for all readings "Triggered"

- 1) What are Fletcher's primary symptoms? Do his symptoms mainly present externally (like handwashing) or internally? Also, name a few things that became obsessions during Fletcher's early life.
- 2) How does the author relate rituals in OCD to perceived risks in the world?
- 3) Based on what we commonly recognize as symptoms of OCD, why do you think Fletcher remained undiagnosed or misdiagnosed until college?
- 4) Discuss and evaluate Fletcher's reactions to the use of OCD and other mental disorders in popular culture (see especially chapter 9).
- 5) How does Fletcher describe the effect of medication on his personality and his disease? Compare this to the "Faustian bargain" he believes many people imagine medication to be.

# "The Day the Voices Stopped"

- 1) Describe 4 symptoms of schizophrenia that Ken Steele experienced. (1 point)
- 2) In the chapters title "Closing other doors" and "Second chances", how does Ken's alter ego of "Shannon Steele" help him? In what ways does it hold him back? (1 point)
- 3) In chapter 8, how does Ken's improvement of symptoms present new challenges for him? (1 point)
- 4) What was most interesting or striking about the "The Day the Voices Stopped" reading? (1 point)

#### "An Unquiet Mind"

- 1) In the chapter titled "Missing Saturn" (beginning on page 90 of my edition), Dr. Jamison discusses the "lure of mania". Discuss briefly her description of the temporary positive aspects of manic episodes.
- 2) Also in the chapter titled "Missing Saturn", Dr. Jamison discusses other reasons for not taking lithium as prescribed. Briefly discuss some of these reasons.
- 3) In the next chapter (titled "The Charnel House"), what are some symptoms of depression that Dr. Jamison experiences in her depressed and mixed episodes? What is meant by a "mixed" episode?
- 4) In the chapter titled "Love Watching Madness" (beginning on page 163 of my edition), Dr. Jamison discusses her transition to a more stable state of managing her disease. Describe briefly how she accomplished this.
- 5) Read the last chapter ("A Life in Moods") and the Epilogue. How does Dr. Jamison's experience with bipolar disorder affect her view of life?

Supplementary Material for Palissery GK et al. (2018) Understanding checkpoints as an assessment tool. J Undergrad Neurosci Educ 17(1): R4-R14 "Front of the Class"

- 1) Discuss the way adults responded to Brad's Tourette Syndrome in his early life. How do they react to him and to each other?
- 2) How does Brad's experience at the assembly in which he describes Tourette Syndrome to his peers and teachers shape his school experience? How does that relate to his future experiences?
- 3) In the Appendix, Brad suggests using "the one-chance rule": that everyone should be educated and given one opportunity to change their reactions to him. Is this appropriate? Too lenient? Not lenient enough? Explain.
- 4) In what ways does Brad view Tourette Syndrome as a positive for him as a teacher?
- 5) Describe your reactions to how Brad responds to difficult children, such as Jacob (see "coloring outside the lines").
- 6) Describe your reactions to the story about Heather.

### "Still Alice" (fiction)

- 1) What are some early signs of dementia that Alice exhibits?
- 2) What is the particular genetic mutation that Alice has? How does the genetics in her case compare to most cases of Alzheimer's discussed in class?
- 3) What are some of the mid-stage signs of dementia that Alice exhibits in summer 2004? How does the progression of her disease compare to the normal progression we studied in class?
- 4) In reading the short paragraph after the "August 2004" chapter about neurons communicating with each other, discuss how trophic factors (such as brain-derived neurotrophic factor BDNF) relate to this short passage.

# "The Curious Incident of the Dog in the Night-Time"

- 1) What are some unusual personality or behavior traits that Christopher has?
- 2) What are some ways in which other characters interact with Christopher that are **not** helpful?
- 3) What are some ways in which other characters interact with Christopher that are helpful?
- 4) Watch the "Sally/Anne test" video on YouTube (<a href="https://www.youtube.com/watch?v=QjkTQtggLH4">https://www.youtube.com/watch?v=QjkTQtggLH4</a>). Discuss how this test relates to autism in general and to the character of Christopher in particular (see the chapter titled "163"). How does his solution to this test differ from the way a neuro-typical person would reason through it?

Supplementary Material for Palissery GK et al. (2018) Understanding checkpoints as an assessment tool. J Undergrad Neurosci Educ 17(1): R4-R14 "The Noonday Demon"

- 1) How does knowing the author experiences episodes of depression affect your impression of the book? Does it make the book more or less credible?
- 2) What are some of the common myths/misperceptions surrounding depression? Does the author have any experience relating to these common myths?
- 3) The author uses many analogies to explain the experience of depression. In your opinion, which analogy was most effective?
- 4) What was most surprising about the author's breakdowns? What did people around him do that was helpful?
- 5) What do you find most useful about the book so far? What do you dislike about it?

#### **Brain on Fire:**

- 1) List the many incorrect diagnoses that Susannah gets throughout the book. For each diagnosis, describe the symptoms that she exhibited and explain why the she received that diagnosis; relate each diagnosis to her symptoms and refer to what we have learned about that disease in class this semester. NOTE: to fully answer this, you will need to summarize a lot of the material from the whole semester, so this question requires you to fill in a lot of information and is expected to take 3 pages handwritten or 1 page typed.
- 2) Recall the episode in which Susannah's doctor misdiagnosed her as an alcoholic. Provide arguments for why the doctor may have been acting appropriately in making this diagnosis; then provide arguments for why the doctor may have been acting inappropriately in making this diagnosis; finally evaluate these reasons and draw a conclusion about whether you think the doctor behaved appropriately overall or not given the information he had to go on. (Additionally, keep in mind that Susannah is not a physician and she occasionally uses colloquial, non-recognized diagnoses; she says her doctor diagnosed her as an "alcoholic" even though as readers of the autobiography we can infer that the doctor would have given a recognized medical diagnosis such as "alcohol dependence" or "alcohol abuse".)